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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			a mormacon uniesa ()	contains a valid OMB control number.
FY 2007				
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4848)				
			Docket Number (O	otional): KAS-248
Application Number: 10/541,450			Filed: July 6, 2005	
For: TRAVELING HYDRAULIC WORKING MACHINE				
Art Unit: 3618			Examiner: F.B. Vanaman	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
		<u>Fee</u>	Small Entity	Fee .
⊠ One mo	onth (37 CFR 1.17(a)(1))	\$120	\$60	\$ <u>120.00</u>
☐ Two mo	onths (37 CFR 1.17(a)(2))	\$460	\$230	\$
☐ Three n	months (37 CFR 1.17(a)(3))	\$1050	\$525	\$
Four mo	onths (37 CFR 1.17(a)(4))	\$1640	\$820	\$
Five mo	onths (37 CFR 1.17(a)(5))	\$2230	\$1115	\$
Applicant claims small entity status. See 37 CFR 1.27.				
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is attached.				
The Director has already been authorized to charge fees in this application to a Deposit Account.				
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account				
Number 50-1417. I have enclosed a duplicate copy of this sheet.				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71.				
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
attorney or agent of record. Registration Number 30,293				
attorney or agent under 37 CFR 1.34.				
Registration number if acting under 37 CFR 1.34				
Name (Print/Type)	John R. Mattingly		io. (Attorney/Agent)	30,293
Signature	Chall lay 5		7, 2008	Telephone Number:(703) 684-1120
NOTE: Signatures of all the inventors or assignment of receip of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. Total of				

If you need assistance in completing the form, call 1-800-PTO-9199 and select option.

07/08/2008 PCHOMP

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